#### Case 1:21-bk-10533 Doc 1-1 Filed 06/30/21 Entered 06/30/21 15:46:48 Desc Voluntary Petition Page 1 of 42

Fill in this information to identify your case:	
United States Bankruptcy Court for the: District of	
Case number (If known):	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		•
	Write the name that is on your government-issued picture	Nancy Ann Smith	
	identification (for example, your driver's license or	First name	First name
	passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
caca.	CTB. (**) . 1.75 5 7 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	· · · · · · · · · · · · · · · · · · ·	PR PRINTED TO THE PROPERTY OF STATE OF
2.	All other names you	Nancy Ann Thibault	
	have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
***************************************	rig 1960ko, Dieteros de Bernstein ferene anteres de sententis (1962) estas el Calorina (1972). Se de estas fotos	NONCONCONCOCCONOCIONES NAMEDATORA CONCOCATO DE SERVADORA CONTOCATO DE SERVADO DE SERVADO DE SERVADO DE SERVADO	\$
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>5</u> <u>7</u> <u>5</u> <u>2</u>	xxx - xx
	number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

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Debtor 1		Case number (# known)
First Name Midd	e Name  Last Name .	
aningkan (1986). 44/2739 (25/344-727-44) (26/34) (26/34) (26/34) (26/34)	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN — — — — — — — — — — — — — — — — — — —
5. Where you live	· 中国《《中国》(《中华》《西西西山·河南)(《中华》(《中华》(《中苏)(《中华)(中国)(中国)(中国)(中国)(中国)(中国)(中国)(中国)(中国)(中国	If Debtor 2 lives at a different address:
	46 Eddy Street Number Street	Number Street
	Cranston ri 02920	
	City State ZIP Code Providence	City State ZIP Code
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
6. Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
		i i i i i i i i i i i i i i i i i i i

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De	btor 1 First Name Middle Na	me	Last Name		Case number (# k	nown)			
		•				•			
Pa	art 2: Tell the Court Abo	ut Your B	ankrup	tcy Case					
7.	The chapter of the Bankruptcy Code you	y Code you for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	are choosing to file under	☑ Cha	oter 7						
		☐ Cha	oter 11						
		☐ Cha	oter 12						
		☐ Cha	oter 13						
8.	How you will pay the fee	local your subravith  I nee Appi  I required By lates pay	court for self, you nitting you a pre-pred to pa ication fuest that w, a jud than 15the fee it	or more details about how you not may pay with cash, cashier's cour payment on your behalf, your inted address.  The second of the official poverty line the second of the official poverty line the second of the s	nay pay. Typicall check, or money ur attorney may bu choose this op Fee in Installmed request this opt waive your fee, a at applies to youn 103B) and file it	order. If your attorney is pay with a credit card or check oftion, sign and attach the ents (Official Form 103A).  Identify the control of th			
9.	Have you filed for bankruptcy within the last 8 years?	☑ No ☐ Yes.	District	When		Case number			
			District .	When	MM / DD / YYYY	Case number			
			District .	When	MM / DD / YYYY	Case number			
10.	Are any bankruptcy	No 🔽							
	cases pending or being filed by a spouse who is	🛚 Yes.	Debtor			Relationship to you			
	not filing this case with you, or by a business partner, or by an affiliate?		District .	When .	MM/DD/YYYY	Case number, if known			
			Debtor .			Relationship to you			
			District .	When	MM / DD / YYYY	Case number, if known			
11.	Do you rent your residence?	☐ No. ☑ Yes.	No.	ur landlord obtained an eviction judg Go to line 12.	gment against you	? f Against You (Form 101A) and file it as			

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Debtor 1 First Name Middle	Name	Last Name	Case r	number (#known)_				
List valie wook	наты	rast waine						
Part 3: Report About An	y Busines	ses You Own as a Sole	Proprietor					
12. Are you a sole propriet	or 🛭 No.	Go to Part 4.						
of any full- or part-time business?	☐ Yes	☐ Yes. Name and location of business						
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, o	<b>;</b>	Name of business, if any			<del></del>			
LLC.	ı	Number Street	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·				
If you have more than one sole proprietorship, use a separate sheet and attach it				<del> </del>				
to this petition.		City		State	ZIP Code			
		Check the appropriate box	x to describe your business.	:				
		☐ Health Care Business	(as defined in 11 U.S.C. §	101(27A))				
		☐ Single Asset Real Est	ate (as defined in 11 U.S.C.	. § 101(51B))				
		☐ Stockbroker (as define	ed in 11 U.S.C. § 101(53A))	)				
		Commodity Broker (as defined in 11 U.S.C. § 101(6))						
		☐ None of the above						
13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small busines debtor</i> or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	choosing are a sign most regif any of the life and the li	ng to proceed under Subchimall business debtor or you cent balance sheet, statem of these documents do not end am not filing under Chapter the Bankruptcy Code.  I am filing under Chapter Code, and I do not choose. I am filing under Chapter Code, and I do not choose.	apter V so that it can set ap, are choosing to proceed unent of operations, cash-flow exist, follow the procedure in ter 11.  11, but I am NOT a small but	propriate dead nder Subchap w statement, a n 11 U.S.C. § usiness debtor ebtor accordin pter V of Chap g to the definit	r according to the definition in ng to the definition in the Bankruptcy oter 11. ion in § 1182(1) of the			

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4. Do you own or have any		Any Hazardous Pro		<del></del>			
property that poses or is	№ No						
alleged to pose a threat	Yes.	What is the hazard?					
of imminent and identifiable hazard to						-	 
public health or safety?				<del></del>	<del></del>		 
Or do you own any							
property that needs immediate attention?		If immediate attention i	s needed, w	hy is it needed?	?		
For example, do you own							 
perishable goods, or livestock that must be fed, or a building					<del></del>	· · · · · · · · · · · · · · · · · · ·	 <del></del>
that needs urgent repairs?							
		Where is the property?					

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Debtor 1 First Name Minde No	ome Last Name	C	ase number (if known)	
Part 5: Explain Your Effor	ts to Receive a B	riefing About Credit Counseling		•
5. Tell the court whether	About Debtor 1:		About Debtor 2 (	Spouse Only in a Joint Case):
you have received a briefing about credit	You must check of	ne:	You must check o	ne:
counseling.	1 received a be	riefing from an approved credit	T I received a b	riefing from an approved credit
The law requires that you receive a briefing about credit counseling before you file for	counseling ag filed this bank certificate of c	counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.		gency within the 180 days before I kruptcy petition, and I received a completion.
bankruptcy. You must truthfully check one of the	plan, if any, tha	of the certificate and the payment at you developed with the agency.	Attach a copy plan, if any, the	of the certificate and the payment at you developed with the agency.
following choices. If you cannot do so, you are not eligible to file.	counseling ag	iefing from an approved credit ency within the 180 days before I ruptcy petition, but I do not have a completion.	counseling ag	riefing from an approved credit gency within the 180 days before I cruptcy petition, but I do not have a completion.
If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors		after you file this bankruptcy petition, a copy of the certificate and payment	Within 14 days you MUST file plan, if any.	after you file this bankruptcy petition, a copy of the certificate and payment
can begin collection activities again.	services from unable to obta days after I ma	asked for credit counseling an approved agency, but was in those services during the 7 ade my request, and exigent s merit a 30-day temporary waiver nent.	services from unable to obta days after i m	asked for credit counseling an approved agency, but was ain those services during the 7 ade my request, and exigent s merit a 30-day temporary waiver ment.
	requirement, at what efforts you you were unabl bankruptcy, and	To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.		day temporary waiver of the tach a separate sheet explaining umade to obtain the briefing, why le to obtain it before you filed for dwhat.exigent circumstances file this case.
	dissatisfied with briefing before y If the court is sa still receive a br You must file a agency, along v	be dismissed if the court is your reasons for not receiving a your reasons for not receiving a you filed for bankruptcy.  Itisfied with your reasons, you must iefing within 30 days after you file. certificate from the approved yith a copy of the payment plan you yy. If you do not do so, your case ed.	dissatisfied with briefing before If the court is so still receive a b You must file a agency, along was still still the	be dismissed if the court is n your reasons for not receiving a you filed for bankruptcy. atisfied with your reasons, you must riefing within 30 days after you file. certificate from the approved with a copy of the payment plan you ny. If you do not do so, your case ied.
	Any extension only for cause a days.	f the 30-day deadline is granted nd is limited to a maximum of 15	Any extension of	of the 30-day deadline is granted and is limited to a maximum of 15
	☐ I am not require credit counseli	ed to receive a briefing about ng because of:	I am not requir credit counsel	ed to receive a briefing about ing because of:
		I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
	☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	🗖 Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
	Active duty.	I am currently on active military duty in a military combat zone.	☐ Active duty	I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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De	CPUS 1	, az repro		Case receiber .				
P	it 6: Answer These Ques	stions for Reporting	Purposes					
16 What kind of debts do you have?		as incurred by an individual primarily for a personal, family, or household purpose.						
		☑ Yes: Go to line 17  16th Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
		□ No Go to line 16c □ Yes Go to line 17						
		16c. State the type of o	iebis you owe that are no	of consumer debts or b	ousiness debts			
17	Are you filing under Chapter 7?	•	under Chapter 7 Go to fi					
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☑ Yes. I am filing undi- administrative ☑ No ☐ Yes	er Chapter 7. Do you est expenses are paid that t	imate that after any ex unds will be available	empt property is excluded and to distribute to unsecured creditors?			
18	How many creditors do you estimate that you owe?	☑ 1-49 □ 50-99 □ 100-199 □ 200-999	① 1.000-5 ② 5.001-1 ② 10.001-	10.000	☐ 25 001-50,000 ☐ 50 001-100 000 ☐ More than 100 000			
19	How much do you estimate your assets to be worth?	☑ \$0-\$50 000 □ \$50 001-\$100 000 □ \$100 001-\$500 000 □ \$500,001-\$1 million	☐ \$10 000 ☐ \$50 000	.001-\$10 million 0,001-\$50 million 0.001-\$100 million 00,001-\$500 million	☐ \$500 000 001-\$1 billion ☐ \$1,000 000 001-\$10 billion ☐ \$10,000 000 001-\$50 billion ☐ More than \$50 billion			
20	How much do you estimate your liabilities to be?	☑ \$0-\$50.000 □ \$50.001-\$100.000 □ \$100.001-\$500.000 □ \$500.001-\$1 million	☐ \$10,000 ☐ \$50,000	,001-510 million 0 001-550 million 0,001-5100 million 00,001-5500 million	S500,000,001-\$1 billion  \$1,000,000,001-\$10 billion  \$10,000,000,001-\$50 billion  More than \$50 billion			
Q.	art 7: Sign Below							
Fo	or you	I have examined this pe correct	etition, and I declare unde	ar penalty of perjury the	at the information provided is true and			
		If I have chosen to file of title 11. United States under Chapter 7	inder Chapter 7.1 am aw s Code 1 understand the	rare that I may proceed relief available under i	1, if eligible, under Chapter 7, 11, 12, or 13 each chapter, and I choose to proceed			
			s me and I did not pay or blained and read the nut		e who is not an attorney to help me fill out C § 342(b)			
		I request relief in accord	tance with the chapter of	title 11. United States	Code, specified in this partition			
		Lunderstand making a f with a bankruptcy case 18 U.S.C. §§ 152, 1341	can result in fines up to \$	ng property, or obtainir \$250 000 or imprisorin	ng money or property by fraud in correction ment for up to 20 years, or both			
		Signature of Debter Executed on 6	Swell	Signatu	ure of Debtor 2			
		Executed on 6	129/2001	Execut	ed on MM / DO / YYYY			

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

page 7

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Debtor 1		Case number (if known)	
First Name Middle Nam	e Last Name		
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this pet to proceed under Chapter 7, 11, 12, or 13 of title available under each chapter for which the perso	11, United States Code, an n is eligible. I also certify the	d have explained the relief at I have delivered to the debtor(s)
If you are not represented by an attorney, you do not need to file this page.	the notice required by 11 U.S.C. § 342(b) and, in knowledge after an inquiry that the information in Signature of Attorney for Debtor		
·	Paul Dinsmore Printed name  Attorney Paul Dinsmore Firm name  25 Orange Street Number Street		
	East Providence	<b>ri</b> State	02916 ZIP Code
	Contact phone (401) 434-3250	Email address	
	2564	ri	
	Bar number	State	•

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Dieptica 1 Cold Watter Strain France	Last Actions	Case number was a
For you if you are filing this bankruptcy without an attorney	The law allows you, as an individual, to represented understand that many people find themselves successfully. Because bankronsequences, you are strongly urged to	uptcy has long-term o
If you are represented by an attorney, you do not neod to file this page	To be successful, you must correctly file and his technical, and a mistake or maction may affect dismissed because you did not file a required of hearing, or cooperate with the court, case trust firm if your case is selected for audit. If that hap case or you may tose protections, including the	andle your bankruptcy case. The rules are very your rights. For example, your case may be focument, pay a fee on time, attend a meeting, e.g., U.S. trustee, bankruptcy administrator, or supplies, you could lose your right to be a country.
	You must list all your property and debts in the court. Even if you plan to pay a particular debt on your schedules. If you do not list a debt, the oproperty or property claim it as exempt, you mailso deny you a discharge of all your debts if you ase, such as destroying or hiding property, falso cases are randomly audited to determine if debt Bankruptcy fraud is a serious crime; you could	pulside of your bankruptcy you must list that de debt may not be discharged. If you do not hat y not be able to keep the property. The judge of ou do something distronest in your bankruptcy offying records, or lying. Individual bankruptcy fors have been accurate. Truthful, and complete
	If you decide to file without an attorney, the cour bired an attorney. The court will not treat you dif successful, you must be familiar with the United Bankruptcy Procedure, and the local rules of the be familiar with any state exemption laws that ag	ferently because you are filing for yourself. To States Bankruptcy Code, the Federal Rules of court in which your case is filed. You must als
	Are you aware that filing for bankruptcy is a serio consequences?	ous action with long-term financial and legal
	☐ NO ☑ Yes	
	Are you aware that bankruptcy froud is a serious inaccurate or incomplete, you could be fined or in	
	□ No ☑ Yes	
	Did you pay or agree to pay someone who is not	an attorney to help you fill out your bankruptcy
	M 11 11 12 12 12 12 12 12 12 12 12 12 12	e Declaration, and Signature (Official Form 119)
	By signing here, I acknowledge that I understand have read and understood this notice, and I am a attorney may cause me to lose my rights or prope	ware that filing a bankruptcy case without an
ز	Many Smoll	×
	Signature of Dehior 1	Signature of Unblur 2
	Date (5/79/30.)	Date Mrd C", YNYY
	Contact phone	Contact phone
	407=649=5969	Coli phone

## . Case 1:21-bk-10533 Doc 1-1 Filed 06/30/21 Entered 06/30/21 15:46:48 Desc Voluntary Petition Page 10 of 42

Fill in this information to identify your case:	
Debtor 1 Nancy Ann Smith	
First Name Middle Name Last Name Debtor 2	
(Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: District of	
Case number (If known)	Check if this is an amended filing
	· ·
Official Form 106Sum	
Summary of Your Assets and Liabilities and Certain Statistical Info	ermation 12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for	
information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	
Part 1: Summarize Your Assets	
	Your assets
	Value of what you own
Schedule A/B: Property (Official Form 106A/B)     1a. Copy line 55, Total real estate, from Schedule A/B	\$30,610.00
	04 045 00
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>31,015.00</u>
1c. Copy line 63, Total of all property on Schedule A/B	\$ 31,015.00
Part 2: Summarize Your Liabilities	
	Your liabilities
	Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	\$ 14,679.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ s 67,430.04
•	+ \$
Your total liabilities	\$82,109.04
	<u> </u>
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	s 5,596.00
Copy your combined monthly income from line 12 of Schedule I	\$
Schedule J: Your Expenses (Official Form 106J)     Copy your monthly expenses from line 22c of Schedule J	s 5,600.00
	ÿ <u></u>
and the control of th	

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Debtor 1	Nancy Ann Smith First Name Middle Name Last Name	Case number (#known)
Part 4	: Answer These Questions for Administrative and Statistical Record	s
6. Are	you filing for bankruptcy under Chapters 7, 11, or 13?	
	No. You have nothing to report on this part of the form. Check this box and submit this Yes	form to the court with your other schedules.
7. Wha	t kind of debt do you have?	and the second of the second o
Ø	Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpore.	n individual primarily for a personal, oses. 28 U.S.C. § 159.
	Your debts are not primarily consumer debts. You have nothing to report on this parties form to the court with your other schedules.	rt of the form. Check this box and submit
	en e	menter transfer and the second of the second
8. Fro	n the Statement of Your Current Monthly Income: Copy your total current monthly in 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	s 6,996.00
		A second
9. <b>Co</b> p	y the following special categories of claims from Part 4, line 6 of Schedule E/F:	
		Total claim
Fr	om Part 4 on Schedule E/F, copy the following:	~
9a.	Domestic support obligations (Copy line 6a.)	\$
9b. ¹	Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. (	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	s0.00
9d. S	Student loans. (Copy line 6f.)	s0.00
	Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. I	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
9g. 1	otal. Add lines 9a through 9f.	s

Fill in this information to identify your case and th	is filing:		
Debtor 1			
First Name Middle Name  Debtor 2	Last Name		
(Spousa, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Distr	ict of		
Case number			
		Check if this is an amended filing	
Official Farms 400A/D		• • • • • • • • • • • • • • • • • • • •	
Official Form 106A/B			
Schedule A/B: Propert	ty	12/15	
category where you think it fits best. Be as comp responsible for supplying correct information. If r write your name and case number (if known). Ans	ns. List an asset only once. If an asset fits in more lete and accurate as possible. If two married people nore space is needed, attach a separate sheet to the over every question.  1, Land, or Other Real Estate You Own or Have the control of the	e are filing together, both are equally is form. On the top of any additional pages,	
1. Do you own or have any legal or equitable inter	est in any residence, building, land, or similar prop	erty?	
☐ No. Go to Part 2.			
Yes, Where is the property?	What is the property? Check all that apply.		
9505 W. IrloPropson, Momo	☐ Single-family home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D:	
1.1. 8505 W. IrloBronson, Memo, . Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Claims Secured by Property.	
	Condominium or cooperative  Manufactured or mobile home	Current value of the entire property? Current value of the portion you own?	
Kissimmee, Fl. 34747	- Q Land	\$ 13,151.00 \$ 13,151.00	
	☐ Investment property	<u> </u>	
City State ZIP Code		Describe the nature of your ownership interest (such as fee simple, tenancy by	
	U Other	the entireties, or a life estate), if known.	
	Who has an interest in the property? Check one.	Timeshare	
Florida	Debtor 1 only  Debtor 2 only		
County	Debtor 1 and Debtor 2 only	☐ Check if this is community property	
	At least one of the debtors and another	(see instructions)	
	Other information you wish to add about this it property identification number:	em, such as local	
If you own or have more than one, list here:	property identification number:		
in you own or have more than one, list here.	What is the property? Check all that apply.	Do not deduct secured claims or exemptions. Put	
12 8505 W. Irlo Bronson,	☐ Single-family home	the amount of any secured claims on Schedule D:	
1.2. Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Claims Secured by Property.	
	Condominium or cooperative  Manufactured or mobile home	Current value of the entire property? Current value of the portion you own?	
memo, Kissimmee, Fl. 34747	Land	\$ 17,459.00 \$ 17,459.00	
	☐ Investment property		
City State ZIP Code		Describe the nature of your ownership interest (such as fee simple, tenancy by	
·	Other	the entireties, or a life estate), if known.	
	Who has an interest in the property? Check one.	Timeshare	
Florida	Debtor 1 only		
County	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Check if this is community property	
	At least one of the debtors and another	(see instructions)	
	Other information you wish to add about this ite	m. such as local	
	property identification number:		

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Debtor 1	Fast Name Middle Name Last Nam	Case number (#	known)	····
1.3.	5601 Windhover Dr., Orlando, Fl. Street address, if available, or other description	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home  Land	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D:
	City State ZIP Cod	Investment property  Timeshare  Other	Describe the nature of Interest (such as fee the entireties, or a lif	simple, tenancy by
	Florida	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Other information you wish to add about this its property identification number:	Check if this is co (see instructions)	mmunity property
		all of your entries from Part 1, including any entries		\$ 30,610.00
ou own	that someone else drives. If you lease a vehi vans, trucks, tractors, sport utility vehicle	est in any vehicles, whether they are registered or cole, also report it on Schedule G: Executory Contracts are, motorcycles		5
3.1.	Make: Hondai  Model: tucson  Year: 2020  Approximate mileage: 12000	Who has an interest in the property? Check one.  ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property?	d claims on Schedule D:
	Other information: Leased car	☐ Check if this is community property (see instructions)	\$_18000.00	\$18000.00
If you	own or have more than one, describe here:			
<b>v</b>	Make:  Model:  Year:	Who has an Interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured class the amount of any secured Creditors Who Have Claim Current value of the antire property?	d claims on Schedule D: ns Secured by Property.  Current value of the
	Approximate mileage: Other information:	☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	entire property?	portion you own?

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Who has an interest in the property? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	aims or exemptions. Pul
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure	aims or exemptions. Pu
Debtor 2 only Debtor 1 and Debtor 2 only		
Debtor 1 and Debtor 2 only		
	0	
<ul> <li>At least one of the debtors and another</li> </ul>	Current value of the entire property?	Current value of portion you own
		p = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =
Charle if this is somewhite seconds (see	\$	\$
☐ Check if this is community property (see instructions)	· · · · · · · · · · · · · · · · · · ·	~ <u>~~~</u>
i		
Who has an interest in the property? Check one.	Do not deduct secured cla	ilms ar exemptions. Pu
Debtor 1 only	the amount of any secure Creditors Who Have Clain	d claims on <i>Schedule L</i> ns Secured bv Propert
Debtor 2 only		
Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of to portion you own?
At least one of the debtors and another	- Constant	position you only
Check if this is community property (see	\$	\$
instructions)	· · · · · · · · · · · · · · · · · · ·	7
Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions, Pu
Debtor 1 only	the amount of any secured Creditors Who Have Clain	
Debtor 2 only		
Debtor 1 and Debtor 2 only	Current value of the	Current value of t
At least one of the debtors and another	entire property?	portion you own?
☐ Check if this is community property (see instructions)	\$10,000.00	\$10,000.0
<del>-</del>		
Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
Debtor 1 only	the amount of any secured Creditors Who Have Claim	i claims on <i>Śchedule D</i>
Debtor 2 only		
Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of t portion you own?
At least one of the debtors and another	ontino proporty.	portion you out
	\$	\$
☐ Check if this is community property (see instructions)		
	instructions)	instructions)

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Debtor 1	Nancy Ann Smith First Name Middle Name Lest Name	Case number (#known)	
Part 3:	Describe Your Personal and Household Items		
	wn or have any legal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured or exemptions.	
	ehold goods and furnishings o/es: Major appliances, furniture, linens, china, kitchenware		
☐ No ☑ Ye	es. Describe	\$1,40	0.00
7. Electro Examp	oles: Televisions and radios; audio, video, stereo, and digital equipment; computers, collections; electronic devices including cell phones, cameras, media players, gr	ames	
	s. Describe	\$65	0.00
<i>Examp</i> □ No	tibles of value  oles: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or oth stamp, coin, or baseball card collections; other collections, memorabilia, collections	ner art objects; ibles	
9. Equipn Examp	ment for sports and hobbles  oles: Sports, photographic, exercise, and other hobby equipment; bicycles, pool table and kayaks; carpentry tools; musical instruments	es, golf clubs, skis; canoes	
☑ No	oles: Pistols, rifles, shotguns, ammunition, and related equipment		
☐ No	oles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	\$ 500	0.00
	oles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom j gold, silver	•	
☐ No ☑ Yes	s. Describecostume jewelry		0.00
13. Non-ta	orm animals oles: Dogs, cats, birds, horses	•	
	s. Describepitbull	200	0.00
	ther personal and household items you did not already list, including any health	aids you did not list	
	s. Give specific cormation	: <b>c</b>	
15. Add th	ne dollar value of all of your entries from Part 3, including any entries for pages	·	0.00

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Debtor 1 Nancy A		Ca	ase number (# known)	
First Name	Middle Name Last Name	· · ·	*	
Part 4: Describe Y	our Financial Assets			·
Do you own or have an	y legal or equitable interest in	any of the following?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
16. Cash Examples: Money yo	u have in your wallet, in your hor	ne, in a safe deposit box, and on hand	when you file your petition	
☑ No				
☐ Yes			Cash:	\$
	similar institutions. If you have n	unts; certificates of deposit; shares in conditional control of the same institution of the same institution of the same institution name:		
	17.1. Checking account:	Santander, Cranston		s 5.00
	17.2. Checking account:	Santander, Cranston		\$ 60.00
	17.3. Savings account:			\$
	17.4. Savings account:			\$
	17.5. Certificates of deposit:			\$
	17.6. Other financial account:	·		\$
	17.7. Other financial account:			\$
	17.8. Other financial account:	·		\$
	17.9. Other financial account:			\$
	s, or publicly traded stocks			
No No	s, investment accounts with blok	erage firms, money market accounts		
☐ Yes	Institution or issuer name:			
	-			. \$
				. \$
			· · · · · · · · · · · · · · · · · · ·	· \$
		rated and unincorporated businesse	s, including an interest in	
an LLC, partnership  No	•		06 -6	
Yes. Give specific			% of ownership: 0% %	<b>.</b>
information about them			0% %	\$
			00/	

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Debtor 1			Case number (if known)	
	First Name	Middle Name	Last Namo	<del></del>
20. Gove	ernment and corp	orate bonds and ot	her negotiable and non-negotiable instruments	
Nego	tiable instruments	include personal che	cks, cashiers' checks, promissory notes, and money orders. annot transfer to someone by signing or delivering them.	
		oma are those you d	amor transfer to someone by signing or delivering them,	
<b>2</b> N		<b>1</b>		
	es. Give specific formation about	Issuer name:		
th	em			\$
				\$
				\$
24 Datis				
	ement or pension aples: Interests in If		101(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
□ N			the state of the s	
	es. List each			
ac	count separately.	Type of account:	Institution name:	
		401(k) or similar plan:		\$
		Pension plan:		\$
		IRA:		_
		Retirement account:		\$
			74	\$
		Keogh:		\$
		Additional account:		\$
		Additional account:		\$
	ity deposits and p			
Your s	share of all unused	deposits you have n	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications	
compa	anies, or others	mili ialidiolos, prepa	io terit, public dillides (electric, gas, water), telecommunications	
☐ No				
☐ Ye	es	<u>In</u>	stitution name or individual:	
		Electric:		\$
		Gas:		\$
		Heating oil:		\$
		Security deposit on re	ntal unit:	\$
		Prepaid rent:		_
		Telephone:		\$ \$
		Water:		·
		Rented furniture:		\$
		Other:		\$
				\$
23. Annuit	ties (A contract for	a periodic payment	of money to you, either for life or for a number of years)	
Ø No		= paristic parison	ermane, to you, onlive to me or for a number of yours,	
		Issuer name and des	crintion:	
0		name and des		\$
				\$ \$
				*

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Debtor 1	Nancy Ann Smi			Case number (# known)	
	First Name Middle	a Name	Lasi Name		
-					
26 U.S.	ts in an education IR C. §§ 530(b)(1), 529A			fied ABLE program, or under a qualified state tuition program	<b>n.</b> ·
<b>☑</b> No					
☐ Yes		Institutio	n name and descr	ription. Separately file the records of any interests.11 U.S.C. § 52	21(c):
					_ \$
					\$
		<del>- · · · · · · · · · · · · · · · · · · ·</del>			<b>-</b> \$
exercis	equitable or future in able for your benefit		property (other	than anything listed in line 1), and rights or powers	
☑ No				The state of the s	
	. Give specific				
Infor	rmation about them	<u> </u>			\$
26. Patents	s. copyrights, tradem	ıarks, trade	secrets, and of	her intellectual property	
				om royalties and licensing agreements	
<b>☑</b> No		•	•		
	. Give specific	, <del></del>			
	mation about them	i :			\$
					1
	es, franchises, and o				
Example	es: Building permits, e	exclusive lic	enses, cooperativ	ve association holdings, liquor licenses, professional licenses	
☑ No					
☐ Yes.	. Give specific			*	
infor	mation about them	4 5			<b> \$</b>
Money or p	property owed to you	17			Current value of the portion you own?
					Do not deduct secured
					claims or exemptions.
	ınds owed to you				
Ø No			,		
☐ Yes.	. Give specific informa about them, including	ition Turbether	1	Federal:	\$
	you already filed the	returns		State:	\$
	and the tax years	••••••	1	Local:	\$
			**************************************	en e	
9. Family	support				
		sum alimony	y, spousal suppor	t, child support, maintenance, divorce settlement, property settle	ment
☑ No					
Yes.	. Give specific informa	ition			
				Alimony:	\$
			•	Maintenance:	\$
			į	Support:	\$
				Divorce settlement:	\$
				Property settlement:	\$
io. Other a	mounts someone ov es: Unpaid wages, dis	ability insur	ance payments, o	disability benefits, sick pay, vacation pay, workers' compensation	٦,
	Social Security be	nefits; unpa	id loans you mad	le to someone else	
Ø No					······································
☐ Yes.	. Give specific informa	tion	••		s
					, •

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Debtor	r <b>1</b>	Namey A					Case number (if known)	
		First Name	Middle Name	Last Name	1			
		•	,					
31. Inte	erests	in insuran	ce policies					•
			~	nce; health	h savings accoun	it (HSA); credit, homeo	wner's, or renter's insurance	
	No		-		•	•	•	
ō			surance company by and list its value	Compan;	y name:		Beneficiary:	Surrender or refund value:
		·	•					\$
								\$
								\$
4								<u> </u>
if yo	ou are	the benefic	erty that is due you ary of a living trust, on neone has died.				re currently entitled to receive	
							recovered the consequences of the consequence of th	******
	Yes. G	Sive specific	information	• .				
				·		CONTRACTOR FOR THE STATE AND STATE OF THE ST		\$
33. Cla	ims ag	ainst third	parties, whether o	r not you	have filed a law	suit or made a demai	nd for payment	
	-		employment dispute	-				
	No						and the control of th	
	Yes. D	escribe ead	ch claim				The state of the s	
				į		e e e e e e e e e e e e e e e e e e e	o dividition for all all the second of the second of all the second of t	
34. Oth	er con	tingent and	d unliquidated ciair	ms of ever	ry nature, includ	ling counterclaims of	the debtor and rights	
		claims						
2		_					enter i mentragante della della della constanti della della constanti di constanti della constanti della const	
ч	Yes. D	escribe ead	ch claim	1				s
			i		er serresament særtest til er er mære	s en un control d'année de la company de la	Action 19 in the Comment with a control of the Application of the Comment of the	Y <del></del>
35. Any	finan	cial assets	you did not already	ly list				
			i				man armondi arti salami sinda mara di salami salami sinda mara si di salami si di salami si salami si salami s	
	Yes. G	live specific	information					s
			:	1			e magning canhang magning distribution and cannada a game of the contract of t	
36. <b>Ad</b> c	d the d	ollar value	of all of your entrie	es from Pa	art 4, including a	any entries for pages	you have attached	
for	Part 4.	Write that	number here				<b>→</b>	\$65.00
								· ,
Part 5		)oscribo	Any Rucinocc	Polatod	l Proporty V	ou Own or Hovo	an Interest In. List any ı	raal actate in Bart 1
			Ally Dusiness-	Related		ou Owli of Have	an interest in List any i	earestate in Fart 1.
37. Do y	you ov	n or have	any legal or equital	ble intere	st in any busine	ss-related property?		
	No. Go	to Part 6.						
	Yes. G	io to line 38	•			Ŧ	•	
								Current value of the
							•	portion you own?
								Do not deduct secured claims or exemptions.
								or exemptions.
		recelvable	or commissions yo	ou already	y earned			•
<b>2</b>						ny ir is staller form andre bis Marke Marke Marke (Albert Albert		-
u	Yes. D	escribe	:					ie.
						en en entreta de la destructura de la compansión de la compansión de la compansión de la compansión de la comp	s staffindere – mereg valver ist hant dit tiller samme, mended vant seale hinderammende staffin	.j <del>v</del>
			rnishings, and sup		nrintara assissa S	ay machinon men tata-ta	ones, desks, chairs, electronic devices	
Exal		3191-8891116nc			•	. •	**	i
		escribe	,			e de des la companya de la companya del companya de la companya del companya de la companya de l	The state of the s	7
_	1 68. D	ESUIDE						\$
								.a

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Debtor 1	Nancy Ann			Case nu	mber (#known)	
	First Name	Middle Name	Last Name			
	*					
40. Machine	ery, fixtures, e	quipment, suppl	lies you use in busir	ness, and tools of your trade		
☑ No						
☐ Yes.	. Describe				The second secon	
				one of the second of the secon		Ψ
41.Invento						
	. Describe					· ·
					torus as anomalismo estado	
	s in partnershi	ps or joint vent	ures			
☑ No	December					
⊶ res.	. Describe	Name of entity:			% of ownership:	
					%	\$
					%	\$
				·	%	\$
42 Custom	orliete mailin	g lists, or other	aamailatians			
₩ No	er nata, manni	g lists, or other	Compilations			
	. Do your lists	include persona	ılly identifiable infor	mation (as defined in 11 U.S.C. § 10	)1(41A))?	
	☐ No					
	🔲 Yes. Descr					
		i				\$
44 Any hua	inaca valatad :		i not already list			
44. Ally bus	siness-related	property you did	i not already list	~		
	. Give specific					•
	mation					<b>3</b>
						\$
						\$
				the state of the s	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	\$
						\$
						\$
				uding any entries for pages you ha		\$0.00
10. 1 4.1	0. 7	dii	***************************************	***************************************		
Part 6:	Describe An	v Farm- and C	Commercial Fishir	g-Related Property You Own	or Have an Interest l	n.
			t in farmland, list it l			
· <u> </u>						· · · · · · · · · · · · · · · · · · ·
		ny legal or equit	able interest in any	farm- or commercial fishing-relate	d property?	
	Go to Part 7. Go to line 47.					
<b>—</b> 165.	Go to line 47.					O
						Current value of the portion you own?
						Do not deduct secured claims
47. Farm an	ilmals					or exemptions.
		oultry, farm-raise	d fish			
<b>☑</b> No						
Yes.			and an enter the state of the section of the sectio			
	!		•			\$
	•		<u> </u>	ere entre community and the community of	m gadi dang digun raman ng sama nganggalaman	. ¥

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Debtor 1	Nancy Ann Smith First Name Middle Name Last Name	Case number (# known)	
	*-		
-	either growing or harvested		
☑ No ☐ Yes info	. Give specific		\$
49. <b>Farm a</b> r	nd fishing equipment, implements, machinery, fixtu	res, and tools of trade	
☐ Yes			\$
50. Farm ar	nd fishing supplies, chemicals, and feed		
51. Any fari	m- and commercial fishing-related property you did	not already list	\$
□ No			7
infor	mation		\$
	dollar value of all of your entries from Part 6, inclu	iding any entries for pages you have attached	\$0.00
	have other property of any kind you did not alreadys: Season tickets, country club membership		
☑ No			\$
Yes. infor	Give specific mation		\$
			\$
54. Add the	dollar value of all of your entries from Part 7. Write	that number here	\$0.00
			l
Part 8:	List the Totals of Each Part of this For	m	
55. Part 1: T	otal real estate, line 2		\$
56. Part 2: T	otal vehicles, line 5	\$28,000.00	
57. Part 3: T	otal personal and household items, line 15	\$2,950.00	
58. Part 4: T	otal financial assets, line 36	\$65.00	
59. Part 5: T	otal business-related property, line 45	\$0.00	
50. <b>Part 6: T</b>	otal farm- and fishing-related property, line 52	\$0.00	
61. Part 7: T	otal other property not listed, line 54	+\$	· .
62.Total per	rsonal property. Add lines 56 through 61,	. \$31,015.00 Copy personal property total →	+\$ 3015.00
33. Total of	all property on Schedule A/B. Add line 55 + line 62		\$ <u>31015.00</u>

Fill in this in	formation to identify your case:			
Debtor 1	Nancy Ann Smith			
Debtor 2		Last Name		
(Spouse, if filing)		Last Name District of		
Case number	Bankruptcy Court for the: D	isuici di		☐ Check if this is an
(If known)		<del></del>		amended filing
Official F	Form 106C			
Sched	ule C: The Pro	perty You	Claim as Exemp	<b>t</b> 04/19
Using the prop space is neede	erty you listed on Schedule A/B: Prop	perty (Official Form 106	gether, both are equally responsible for s VB) as your source, list the property that dditional Page as necessary. On the top	you claim as exempt. If more
specific dollar of any applicated retirement fur limits the exer would be limit	r amount as exempt. Alternatively, able statutory limit. Some exemption ads—may be unlimited in dollar am	you may claim the full ons—such as those for nount. However, if you nt and the value of the ount.	mount of the exemption you claim. On fair market value of the property bein health aids, rights to receive certain i claim an exemption of 100% of fair ma property is determined to exceed that	g exempted up to the amount benefits, and tax-exempt arket value under a law that
☐ You a	re claiming state and federal nonbant re claiming federal exemptions. 11 U	J.S.C. § 522(b)(2)		
	scription of the property and line on a A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief	2020 Hondai car	\$18,000.00	□ \$ 18,000.00	leased car
description Line from Schedule			100% of fair market value, up to any applicable statutory limit	
Brief descriptio	n: <u>can/am motorcycle</u>	\$10,000.00	□ \$ <u>10,000.00</u>	RIGL 9-26-(13)
Line from Schedule			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description		\$ <u>14,000.00</u>	□ \$ 14,000.00 □ 100% of fair market value, up to	RIGL 9-26-4(3)
Line from Schedule			any applicable statutory limit	
(Subject to	•	years after that for case	s filed on or after the date of adjustment.  1,215 days before you filed this case?	)
<u> </u>	do ′es		-	

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Debtor 1

Nancy	Ann Smith		Case number (if known)
First Name	Midde Name	Last Name	

#### Part 2: Additional Page

	on of the property and line /B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	electronics	\$ 650.00	650.00	RIGL 9-26-4(16)
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:	clothes	\$ <u>500.00</u>	□ \$ 500.00 □ 100% of fair market value, up to	RIGL 9-26-(1)
Line from Schedule A/B:			any applicable statutory limit	•
Brief description:	costume jewelry	\$200.00	\$ 200.00	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	pitbull	\$200.00	<u>\$</u> 200.00	r igl 9-26-(16)
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	CHECKING SANTAN	\$5.00	\$ 5.00	RIGL 9-26-(16)
Line from Schedule A/B:			any applicable statutory limit	
Brief description:	SANTANDAR SAVING	\$ <u>60.00</u>	<u>s</u> 60.00	RIGL 9-26-(16)
Line from Schedule A/B:		13,151.0	100% of fair market value, up to any applicable statutory limit	
Brief description:	Timeshare for	<u> </u>	□\$ <u>13,151</u> .00	RIGL 9-4-26, 4.1
Line from Schedule A/B:		17,459.0	100% of fair market value, up to any applicable statutory limit	
description.	i <u>meshare for H</u> o	•		rigl 9-4-26, 4.1
Line from Schedule A/B:			any applicable statutory limit	
Brief W description:	estgate Resorts	Ltd		RIGL 9-4-26, 4.1
Line from Schedule A/B:		,	<ul> <li>100% of fair market value, up to any applicable statutory limit</li> </ul>	
Brief description:		\$	<b>D</b> \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		s	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	\$ \$ 100% of fair market value, up to	-
Line from Schedule A/B:			any applicable statutory limit	

Cill in this information to identify				
Fill in this information to identify your cas	e:			
Debtor 1 Nancy Ann Smith Middle N	tame Last Name			
Debtor 2 (Spouse, if filing) First Name Middle N	tame Last Name			
United States Bankruptcy Court for the:				
Case number (If known)				k if this is an
			amer	ided filing
Official Form 106D				
Schedule D: Creditor	s Who Have Claims Secur	ed by Prop	erty	12/15
	If two married people are filing together, both are ed y the Additional Page, fill it out, number the entries,			
additional pages, write your name and cas		and attach it to this	ionii, On the top	OI ally
Do any creditors have claims secured b	v vour property?	•		
•	n to the court with your other schedules. You have nothi	ng else to report on t	his form.	
Yes. Fill in all of the information below.				
Part 1: List All Secured Claims				
		Column A	Column B	Column C
	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2.	Amount of claim Do not deduct the	Value of collatera	
	abetical order according to the creditor's name.	value of collateral.	claim	If any
2.1 Hondai Motor Financial	Describe the property that secures the claim:	s11,031.00	\$ <u>18,000.0</u>	0.00
Creditor's Name PO Box 660891	Hondai leased car			
Number Street		]		
Dallas, Tx. 75264	As of the date you file, the claim is: Check all that apply.  Contingent			
	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.  Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
☐ Check if this claim relates to a community debt	, , , , , , , , , , , , , , , , , , ,	-		
Date debt was incurred 06/28/2021	Last 4 digits of account number 5 7 5 2	والمراقعة	Mirwin of Bridge Taylor Bridge Ballage Ballage Transporter Service	- A lang drip fire de Ministration (17 q. 16 th Ministra
2.2 Freedom Road Financial	Describe the property that secures the claim:	\$ 3,648.00	\$ 10,000.0	0.00
Creditor's Name Box 4597	Can/am Spider motorcycle			
Number Street		j		
	As of the date you file, the claim is: Check all that apply.  Contingent			
Oakbrook, II. 6052:	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)☐ Motorcycle			
Check if this claim relates to a	Other findeoling a right to offset)	•	•	
community debt Date debt was incurred 09/01/2010	Last 4 digits of account number 5 7 5 2			
Add the dollar value of your entries in 0	Column A on this page. Write that number here:	\$ 14.679.00	And the second section of the s	

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							•
Fill in th	is information to identify yo	our case:					
	Nancy Ann Smith						
Debtor 1	First Name	Middle Namo	Last Namo				
Debtor 2							
(Spouse, if	filing) First Name	Middle Name	Last Name				
United Sta	ates Bankruptcy Court for the:	Distri	ct of			<b></b>	
Case num	ber		<del></del>				k if this is an nded filing
(If known)						anici	idea milig
Officia	al Form 106E/F						
		1*4 185					
<u>Scne</u>	dule E/F: Cred	iitors W	ho Have Unsec	ured Clair	ns		12/15
Be as con	plete and accurate as poss	sible. Use Part 1	for creditors with PRIORITY cl	lalms and Part 2 for	r creditors with	NONPRIORIT	Y claims.
			expired leases that could resul				
			le G: Executory Contracts and lin Schedule D: Creditors Who				
			e entries in the boxes on the le				
any additi	onal pages, write your nam	e and case num	ber (if known).				
Part 1:	List All of Your PRIORI	TY Unsecure	i Claims .				
4 Do an	v creditors have priority un	cooured alaims	against you?				· · · · · · · · · · · · · · · · · · ·
	. Go to Part 2.	secured claims	agamst your				
☐ Ye							
		d claims. If a cree	ditor has more than one priority u	nsecured claim, list (	the creditor sepa	rately for each	claim. For
each c	laim listed, identify what type	of claim it is. If a	claim has both priority and nonpi	riority amounts, list the	hat claim here a	nd show both p	oriority and
nonpri	ority amounts. As much as po gred claims, fill out the Contin	essible, list the cla	aims in alphabetical order accord art 1. If more than one creditor ho	ing to the creditor's r	name. If you hav	e more than tw reditors in Par	o priority
		, =	structions for this form in the instr	•	ii, iist tile ouler c	aconors in car	
(1 01 01	t explanation of each type of	olann, occ the m		400000000000000000000000000000000000000	Total claim	Priority	Nonpriority
					* 1	amount	amount
2.1					e	¢	\$
Priority	Creditor's Name		Last 4 digits of account number	·	<b>\$</b>	_ \$	- <del>-</del>
*			When was the debt incurred?				
Numbe	er Street						
			As of the date you file, the claim	is: Check all that appl	ly.		
City	State	ZIP Code	Contingent ·	•			
Who	incurred the debt? Check one.		☐ Unliquidated ☐ Disputed				
	ebtor 1 only						
_	ebtor 2 only		Type of PRIORITY unsecured	claim:			
	ebtor 1 and Debtor 2 only t least one of the debtors and ano	ither	Domestic support obligations				•
	heck if this claim is for a com		Taxes and certain other debts you	-	l .		
		munity deat	Claims for death or personal injuintoxicated	ıry while you were			
IS the	e claim subject to offset?		Other, Specify		_		
☐ Y			Challen was a sure of the latter of the latt				
2.2	- Control of the Control of the Section of the Sect		Last 4 digits of account number				
Priority	Creditor's Name		When was the debt incurred?	<del></del>	Ψ	_ 型	- <del>-</del>
Numbe	er Street	····		***************************************			
			As of the date you file, the claim	is: Check all that appl	ly.		
			Contingent				
City	State	ZIP Code	Unliquidated				
	incurred the debt? Check one.	•	Disputed				•
	ebtor 1 only ebtor 2 only		Type of PRIORITY unsecured	claim:			
	ebtor 1 and Debtor 2 only		Domestic support obligations				
	least one of the debtors and ano	ther	Taxes and certain other debts you		İ		•
Ос	heck if this claim is for a com	munity debt	Claims for death or personal injuintoxicated	ıry while you were	.=		:
Is the	claim subject to offset?		Other. Specify		<del>v-</del>		:
□ N	0	•					
. 🔲 Ye	es		Magnetic Company of the Company of t				

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otor 1 Nancy Ann Smith First Name Middle Name Last Name	Case number (# known	<u> </u>		<del></del>
irt 12 Your PRIORITY Unsecured Claims	s — Continuation Page			
ter listing any entries on this page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprior amount
	Last 4 digits of account number	\$	\$	_ \$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	☐ Contingent ☐ Unliquidated			
City State ZIP Code	Disputed			
Who incurred the debt? Check one.	C Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	<ul> <li>Domestic support obligations</li> <li>Taxes and certain other debts you owe the government</li> </ul>			
At least one of the debtors and another	Claims for death or personal injury while you were			
$oxed{\Box}$ Check if this claim is for a community debt	intoxicated  Other. Specify			
Is the claim subject to offset?				
□ No □ Yes				
The Transfer of the Control of the C	distributed to the state of the			
	Last 4 digits of account number	\$	\$	. \$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
Number Suest	As a fish a data way file the alaim to Ohad all that and			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	<ul> <li>Domestic support obligations</li> <li>Taxes and certain other debts you owe the government</li> </ul>			
☐ At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated  Other. Specify			
is the claim subject to offset?				
Yes		<del>,</del>		
Priority Creditor's Name	Last 4 digits of account number	\$	. \$	. \$
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations			
☐ At least one of the debtors and another	Taxes and certain other debts you owe the government  Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated  Other. Specify			
Is the claim subject to offset?				
□ No				
□ Yes				

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Debi		Case number (# known)
	First Name Middle Name Last Name	
Pai	t 2: List Aii of Your NONPRIORITY Unsecured Claims	
	Do any creditors have nonpriority unsecured claims against you	
	No. You have nothing to report in this part. Submit this form to the	e court with your other schedules.
	<b>☑</b> Yes	
i	nonpriority unsecured claim, list the creditor separately for each claim	order of the creditor who holds each claim. If a creditor has more than one in For each claim listed, identify what type of claim it is. Do not list claims already ist the other creditors in Part 3.If you have more than three nonpriority unsecured
		Total claim
4.1	Barclays Bank Delaware	Last 4 digits of account number 7 5 9 4
	Nonpriority Creditor's Name	\$ 300.00
	Box 8803	When was the debt incurred? 05/29/2020
	Number Street	
	Wilmington, De. 19899 City State ZIP Code	As of the date you file, the claim is: Check all that apply.
	State Zir Code	
	Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated
	Debtor 1 only	Disputed
	Debtor 2 only	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:
	At least one of the debtors and another	☐ Student loans
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce
	Is the claim subject to offset?	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts
	☑ No	Other. Specify Credit card
	☐ Yes	
1.2	Povolovo honis dolovovo	Last 4 digits of account number 4 6 5 1 \$ 1,483.00
٠.٤	Barclays bank delaware Nonpriority Creditor's Name	When was the debt incurred? 07/01/2019
	Box 8803	Then was the dept mounted:
	Number Street	
	Wilmington, De. 19899	As of the date you file, the claim is: Check all that apply.
	City State ZIP Code	Contingent
	Who incurred the debt? Check one.	Unliquidated
	Debtor 1 only	☐ Disputed
	Debtor 2 only	Type of NONPRIORITY unsecured claim;
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	□ Student loans
	_	Obligations arising out of a separation agreement or divorce
	☐ Check if this claim is for a community debt	that you did not report as priority claims
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card
	☑ No □ Yes	Cilier. Opecity Crown Corre
	The state of the s	Billion (Marchine Control of the Con
1.3	Credit Card/FB&T	Last 4 digits of account number 2 8 4 1 3,566.00
	Nonpriority Creditor's Name 2220 6th Street	When was the debt incurred? 11/25/2015
	Number Street	
	Brookings, SD 57006	An of the date year file the claim in Chesicall that and
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.
	Who incurred the debt? Check one.	Contingent
	Debtor 1 only	☐ Unliquidated ☐ Disputed
	Debtor 2 only	- Disputed
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:
	At least one of the debtors and another	Student loans
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce
	Is the claim subject to offset?	that you did not report as priority claims
	No .	Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card
	☐ Yes	

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Debtor 1 Nancy Ann Smith First Name Middle Name Last Name	Case number (# known)	
Last water wind water rest water		
Part 2: Your NONPRIORITY Unsecured Claims — Contin	uation Page	
		<del></del>
After listing any entries on this page, number them beginning wit	th 4.4, followed by 4.5, and so forth.	Total claim
$\neg$		
Credit One Bank Na	Last 4 digits of account number 6 7 2 9	s 251.00
Nonpriority Creditor's Name	When was the debt incurred? 07/01/2019	Ψ
Box 98875	when was the debt incurred?	
Number Street Las Vegas, Nv. 89193 RI	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
M	☐ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
■ Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only  Debtor 1 and Debtor 2 only		
At least one of the debtors and another	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
•	Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset?	Other. Specify Credit Card	
☑ No ☐ Yes		
☐ Yes		
The state of the s		
Discover Fin Svcs Llc	Last 4 digits of account number 5 0 6 7	\$ 4,272.00
Nonpriority Creditor's Name	40/00/0048	
Box 15316	When was the debt incurred? 12/02/2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
Wilmington, De. 19850 City State ZIP Code		
City State Zir Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Student loans	
_	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify Credit card	
₩ No		
☐ Yes		
and the second state of the second se	ante en l'étrateur debutes. En un pur muje vont le sins Malestrateur des étables, més ultre, un rédérant de muje appréssing étables des	s 292.00
Comenity Bank/Westgate	Last 4 digits of account number 5 7 5 2	2
Nonpriority Creditor's Name	When was the debt incurred? 05/29/2020	
Box 182789	when was the debt incurred?	
Number Street Columbus, Oh. 43218	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	□ Contingent	
	☐ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
☑ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
•	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	other, Specify Credit card	
☑ No □ Yes		

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Debt	lor 1	Nancy Ann Smith First Name Middle Name Last Name		Case number (#kn	очт)		
Par	rt 2:	List All of Your NONPRIORITY Unsec	ured Claims				
	□ No ☑ Ye		t this form to the o				
i	nonprio include	of your nonpriority unsecured claims in the ority unsecured claim, list the creditor separately id in Part 1. If more than one creditor holds a para fill out the Continuation Page of Part 2.	ly for each claim.	For each claim listed, identify wha	t type of claim it is. Do not l	list claim	s already
<del>,</del>	,					Total	laim
4.1		day inn Club Vacat		Last 4 digits of account number_	0 0 0 0	s 1	13,151.00
		5 W. Erlo Bronson Memo		When was the debt incurred?	05/21/2016	·	
	Kiss	immee, Fl. 34747	IP Code	As of the date you file, the claim	is: Check all that apply.		
	Who	incurred the debt? Check one. ebtor 1 only ebtor 2 only	ar wood	Contingent Unliquidated Disputed			
	_	ebtor 1 and Debtor 2 only tleast one of the debtors and another		Type of NONPRIORITY unsecur  Student loans	red Claim:		
		heck if this claim is for a community debt		Obligations arising out of a separathat you did not report as priority of	claims		
	is the			Debts to pension or profit-sharing  Other. Specify Credit card	plans, and other similar debts		
4.2		day Inn club Vacat		Last 4 digits of account number When was the debt incurred?	<u>5 7 5 2</u> 11/19/2017	\$	17,459.00
		5 W. Irlo Bronson Memo	<del></del>				
	Numb Kiss	or Street simmee, Fl.34747		As of the date you file, the claim	is: Check all that apply.		
	City	State Zi	IP Code	Contingent			•
	Ø p	incurred the debt? Check one. eblor 1 only		Unliquidated Disputed			
		ebtor 2 only ebtor 1 and Debtor 2 only		Type of NONPRIORITY unsecu	red claim:		
	<b></b> A	t least one of the debtors and another		<ul><li>Student loans</li><li>Obligations arising out of a separate</li></ul>	ation agreement or divorce		
		heck if this claim is for a community debt		that you did not report as priority	claims		
	ls the ☑ N □ Y			Debts to pension or profit-sharing  Other. Specify <u>Credit card</u>	plans, and other similar debts		
4.3	We	stgate Resorts Ltd	Carlotte and Annual Control of the C	Last 4 digits of account number	2 9 0 5		18,829.00
<b></b>	Nonpr 560	iority Creditor's Name 1 Windhover, Dr.		_	06/01/2020	5	10,020.00
	Orla City	ando, Fl. 32819	ZIP Code	As of the date you file, the claim	is: Check all that apply.		
-	Who	incurred the debt? Check one. lebtor 1 only lebtor 2 only		Contingent Unliquidated Disputed			
		ebtor 1 and Debtor 2 only		Type of NONPRIORITY unsecu	red claim:		
		t least one of the debtors and another		Student loans			
				<ul> <li>Obligations arising out of a separ that you did not report as priority</li> <li>Debts to pension or profit-sharing</li> <li>Other. Specify <u>Credit Card</u></li> </ul>	claims plans, and other similar debts		

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Deblor 1	Nancy Ann Smith	Case number (#known)				
; .	First Name Moddle Name Last Name					
Part 2:	Your NONPRIORITY Unsecured Claims — Contin	uation Page				
After list	ing any entries on this page, number them beginning with	h 4.4, followed by 4.5, and so forth.	Total claim			
Svr	ncb/Ppc	Last 4 digits of account number 7 9 1 4	\$ 2,583.00			
Nonp	riority Creditor's Name	When was the debt incurred? 11/25/2016	· ·			
Numl		As of the date you file, the claim is: Check all that apply.				
Orl City	ando, Fl. 32,896	Contingent				
•	o incurred the debt? Check one.	Unliquidated Disputed				
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only  Debtor 1 and Debtor 2 only	Student loans				
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	Check if this claim is for a community debt ne claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit card				
15 ti 121 ti		Collet. Specify 575 art 52.72				
	oppo para (gradition to the first or more table, reported 3 or non-release and department of the included Administrative Property of and the Administrative Property of the Included Administrative Property o	Last 4 digits of account number _5 _7 _52_	\$_5156 <b>.</b> 0			
Nong	Pay Pal Credot Box 105658	When was the debt incurred? 2020	•			
Num	ber Street	As of the date you file, the claim is: Check all that apply.				
City	Atlanta, Ga. 30348-5658 co.	Contingent Unliquidated				
Wh	o incurred the debt? Check one.	☐ Disputed				
	Debtor 1 only					
	Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only  At least one of the debtors and another	Student loans				
		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>				
	Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	he claim subject to offset?	Q Other. Specify <u>Credit debt</u>				
	No Yes					
	منواهم والإنفاقية والمتعاون والمتعاو	Last 4 digits of account number	\$			
Non	priority Creditor's Name	When was the debt incurred?				
Num	iber Street .	As of the date you file, the claim is: Check all that apply.				
City	State ZIP Code	Contingent				
18/1-	a incurred the debt? Check one	Unliquidated				
_	o incurred the debt? Check one.	☐ Disputed				
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only	☐ Student loans	•			
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that				
	Check if this claim is for a community debt	you did not report as priority claims				
	he claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts  Other. Specify				
	No Yes	• ·				

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Debtor 1

Nancy Ann Smith

irst Name Middle Name

Last Name

Case number (# known

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+s	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	

Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

- 6f.
  - s\_\_\_\_\_0.00
- 6g. \$ 0.00
- 6h. s 0.00
- 61. + s<sub>2</sub> 67,430.04
- 6j. s. 67,430.04

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Fil	l <sub>:</sub> in this in	formation to identify	your case:			,				
	•	Nancy Ann Smith					7			
	btor	Nancy Ann Smith	Middle Name		Last Namo					
	btor 2 ouse If filing)	First Name	Middle Name		Last Name					
Un	ited States	Bankruptcy Court for the:	Dis	strict of	<del></del>					
	se number known)									Check if this is an amended filing
										-
		orm 106G								
Sc	hedu	ıle G: Exec	cutory C	ontr	acts an	d Un	expired	Leases		12/15
info	rmation. I	te and accurate as p f more space is need ges, write your name	ed, copy the ad	iditional p	age, fill it out,					
1.	☐ No. C	ave any executory content the second file of the second file of the informa	this form with the	court with	your other sch					A/B)
2.	List sepa	rately each person o rent, vehicle lease, o	r company with	whom yo	u have the co	ntract or I	ease. Then state	what each cont	ract or lea	se is for (for
	Person o	r company with who	m you have the	contract	or leáse		State what the	contract or leas	e is for	
2.1	Hondai	Motor Financial				Leas	se of 2020 Hor	dai car		
	Name Box 66	 0891			·					
	Number Dallas	Street T	c. 75264							
	City		State ZIP Cod	·						
2.2		. The state of the	er i ja kiringer peresidangan enga	- 1	STATE OF THE PERSONNELS AND CO. TO THE	er ve i roma de la domina e	promise desputy (for the depth of the specific section)	- 1 22 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		and the second of the second o
	Name									
	Number	Street								
ļ.,,,,,,,	City	ANNUAL CONTRACTOR OF A SAME OF A	State ZIP Cod	е	PR. BUR 17-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		en transper op regions in sure and since	november and a second of the second	* 1 27.00.000	en nombre in Mindol namely we have presented as
2.3	<u> </u>									
	Name									
-	Number	Street						•		
	City	magazi. Vitale is too le or	State ZIP Cod	е,	man, and the second		name made in electric the indicate color	unus mistra i the resolutions chees	n ay ta wagana ay ay i	n namh cliain aire na h-aire na cheann in ceine cheann a cheann an
2.4	Name				·····					
	Number	Street	<del></del>							
		·	- 717 O-1							
2.5	City	result for reflection to the see	State ZIP Cod	8 2 · · · · • • · · · · · · · · · · · · ·	Par reciper and effective and extra in local leaves	e de la seladad de la sela	NAME AND LICENSES OF SOME TO SELECT AND SERVICES	e dan an i yan i yan i da e ya maanka	<b>24</b> - 79 - 864	and a single affiliation of the second of th
	Name									
	Number	Street		· · · · · · · · · · · · · · · · · · ·		_				
	City		State ZIP Code	<del></del>						

## Case 1:21-bk-10533 Doc 1-1 Filed 06/30/21 Entered 06/30/21 15:46:48 Desc Voluntary Petition Page 33 of 42

Fill in this information to identify your case:	1
Debtor 1 Nancy Ann Smith	
Debtor 1 Name Smith,  First Name Middle Name Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: District of	
Case number	
(If known)	☐ Check if this is an
	amended filing
Official Form 106H	
Schedule H: Your Codebtors	12/15
Codebtors are people or entities who are also liable for any debts you may have. Be are filling together, both are equally responsible for supplying correct information. I and number the entries in the boxes on the left. Attach the Additional Page to this pease number (if known). Answer every question.  1. Do you have any codebtors? (If you are filing a joint case, do not list either, spouse No Yes  2. Within the last 8 years, have you lived in a community property state or territor Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Wall No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time No Yes. In which community state or territory did you live?	f more space is needed, copy the Additional Page, fill it out, page. On the top of any Additional Pages, write your name and as a codebtor.)  Ty? (Community property states and territories include ishington, and Wisconsin.)
	<b>~</b> 
Name of your spouse, former spouse, or legal equivalent	<del></del>
Number Street	_
Number Sueet	
City State ZIP Code	_
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebt shown in line 2 again as a codebtor only if that person is a guarantor or cosign Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule E/F, or Schedule G to fill out Column 2.	ner. Make sure you have listed the creditor on dule G (Official Form 106G). Use Schedule D,
Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
	Check all schedules that apply:
3.1	_
Name	Schedule D, line
·	Schedule D, line
Number Street	
Number Street  City State ZIP Code	☐ Schedule E/F, line
	Schedule E/F, line
City State ZIP Code	Schedule E/F, line
State ZIP Code 3.2	Schedule E/F, line  Schedule G, line  Schedule D, line  Schedule E/F, line
City State ZIP Code  Name  Number Street	Schedule E/F, line
City   State   ZIP Code	Schedule E/F, line  Schedule G, line  Schedule D, line  Schedule E/F, line
City State ZIP Code  Name  Number Street	Schedule E/F, line  Schedule G, line  Schedule D, line  Schedule E/F, line
State ZIP Code  Name  Number Street  City State ZIP Code	Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line Schedule G, line

Official Form 106H

Schedule H: Your Codebtors

page 1 of \_\_\_\_

			,			
Fill in this information to identify	your case:					
Debtor 1 Nancy Ann Smith	•					
First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name		<del>-</del>		
United States Bankruptcy Court for the:	District of					
Case number				Check if	this is:	
(If known)					nended filing	
					_	stpetition chapter 13
					e as of the following	
Official Form 106l				MM / I	DD / YYYY	
Schedule I: You	ır Income					12/15
Be as complete and accurate as po		4		45 14 4 . 15 h		
supplying correct information. If you are separated and your spou separate sheet to this form. On the Part 1: Describe Employm	ou are married and not filings is a not filing with you, of top of any additional pag	ng jointly, and yo lo not include in	our sp forma	ouse is living with tion about your spo	you, include informat ouse. If more space is	lon about your spouse. needed, attach a
Fill in your employment		Detracad			D-140	Fitter
Information.		Debtor 1			Debtor 2 or non	ming spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ☑ Not employ	ved		<ul><li>☑ Employed</li><li>☑ Not employed</li></ul>	i
Include part-time, seasonal, or self-employed work.		Receiving RI	וחד	•	warehouse wor	ker
Occupation may include student or homemaker, if it applies.	Occupation	TOOOTHING TV.				**
	Employer's name				acoustical supp	lies
	Employer's address				11 ricon way	
		Number Street			Number Street	<del>.</del>
						<del></del>
					providence	ri 02909
		City	Sta	e ZIP Code	City	State ZIP Code
	How long employed ther	e? 5 years	•		5 years	
Part 2: Give Details About	Monthly Income	:				
Estimate monthly income as of		. If you have noth	ing to	report for any line, w	rite \$0 in the space. In	clude your non-filing
spouse unless you are separated.  If you or your non-filing spouse habelow. If you need more space, at	ive more than one employer		ormati	on for all employers	for that person on the li	nes
		- 1-1111		For Debtor 1	For Debtor 2 or	
2 Liet monthly areas were selected	and commissions /b-/	fore all neural!			non-filing spouse	: 
<ol><li>List monthly gross wages, sala deductions). If not paid monthly,</li></ol>			2.	s <u> </u>	\$ 3,600.00	
3. Estimate and list monthly over	time pay.		3.	+\$	+ \$	_
4. Calculate gross income. Add lin	ne 2 + line 3.		4.	\$0.00	\$ 3,600.00	

#### Case 1:21-bk-10533 Doc 1-1 Filed 06/30/21 Entered 06/30/21 15:46:48 Desc Voluntary Petition Page 35 of 42

Debtor 1	Nancy Ann Smith First Narge Middle Nanie Last Name		C	ase number (# kno	wn)		
	•		Fo	r Debtor 1		ebtor 2 or ling spouse	
Сор	y line 4 here	<b>≯</b> 4.	\$_	0.00	\$	3,600.00	
5. List	all payroll deductions:						
5a.	Tax, Medicare, and Social Security deductions	5a.	\$		\$	1,000.00	
5b.	Mandatory contributions for retirement plans	5b.	\$_		\$		
5c.	Voluntary contributions for retirement plans	5c.	\$_		\$		
5d.	Required repayments of retirement fund loans	5d.	S		\$	<del></del>	
5e.	Insurance	5e.	\$		\$		
5f.	Domestic support obligations	5f.	\$_		\$		
5g.	Union dues	5g.	\$_		\$	·	
5h.	Other deductions. Specify: Child support	5h.	+\$_		+ \$	400.00	•
6. Add	the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$		\$	1,400.00	
7. Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$		\$	2,200.00	
8. List	all other income regularly received:						
8a.	Net income from rental property and from operating a business, profession, or farm						
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_		\$		
8b.	Interest and dividends	8b.	\$		\$		
8c.	Family support payments that you, a non-filing spouse, or a depende regularly receive	ent		•			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$		\$		
	Unemployment compensation	8d.	\$		\$		
8e.	Social Security	8e.	\$	<del></del>	\$		
	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		¢	3,396.00	s		
	Specify:	8f.	Φ	3,330.00	Φ		
8g.	Pension or retirement income	8g.	\$		\$		
8h.	Other monthly income. Specify:	8h.	+\$_		+\$		
9. Add	d all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	3,396.00	\$_	0.00	····
	ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor.2 or non-filing spouse.	10.	\$_	3,396.00	F	2,200.00	= \$ 5,596.00
Inclu	e all other regular contributions to the expenses that you list in Schedule contributions from an unmarried partner, members of your household, you do or relatives.			ents, your roon	nmates, a	nd other	
	ot include any amounts already included in lines 2-10 or amounts that are cify:	not a	vailable	to pay expens	ses listed	in Schedule J. 11. •	+ s
	the amount in the last column of line 10 to the amount in line 11. The				•		s 5,596.00
₩rite	e that amount on the Summary of Your Assets and Liabilities and Certain S	itatisti	ical Info	ormation, if it a	pplies	12.	Combined monthly income
	you expect an increase or decrease within the year after you file this f	form?	·			·-	
	Yes. Explain:						

I	Fill in this informa	tion to identify	your case:				
Γ		y Ann Smith		Oh a alaif ahi	_ •		
	First Na Debtor 2	me	Middle Name Last Name	Check if thi		•	•
	(Spouse, if filing) First Na	no	Middle Name Last Name	An ame		_	petition chapter 13
	United States Bankrup	otcy Court for the: .	District of			f the following	
	Case number (If known)			MM / DD	/ YYYY	<del></del>	
(	Official Forn	n 106J					
•	Schedule	J: You	ur Expenses				12/15
B	Be as complete and	accurate as po	ssible. If two married people are fillied, attach another sheet to this form				
F	Part 1: Desc	ribe Your Hou	sehold				
1.	Is this a joint cas	e?					
	<ul><li>✓ No. Go to line</li><li>✓ Yes. Does Del</li></ul>		eparate household?				
	☐ No ☐ Yes. I	Debtor 2 must file	e Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.	secondo roma tr Soci	** *** **** **** **** **** ****	
2.	Do you have dep	endents?	₩ No	Dependent's relationship to		Dependent's	Does dependent live
	Do not list Debtor Debtor 2.	1 and	Yes. Fill out this information for each dependent			age	with you?
	Do not state the de names.	ependents'	Caon depondential		· -		□ No □ Yes
	names.						□ No
							Yes
			•		_		☐ No ☐ Yes
							☐ Yes
					-		Yes
							□ No
				100-11-11-1	-	•	☐ Yes
3.	Do your expenses		□ No				
	yourself and you		☐ Yes				
Pa	art 2: Estimat	e Your Ongoi	ng Monthly Expenses				
e			bankruptcy filing date unless you a kruptcy is filed. If this is a suppleme				
			-cash government assistance if you it on Schedule I: Your Income (Office			Your exper	nses
4	. The rental or hor any rent for the g	•	xpenses for your residence. Include	first mortgage payments and	4.	\$	1,300.00
	If not included in	ı line 4:					
	4a. Real estate	taxes			4a.	\$	
	4b. Property, ho	meowner's, or re	enter's insurance		4b.	\$	
	4c. Home maint	enance, repair, a	nd upkeep expenses		4c.	\$	
	4d. Homeowner	's association or	condominium dues		4d.	\$	

## Case 1:21-bk-10533 Doc 1-1 Filed 06/30/21 Entered 06/30/21 15:46:48 Desc Voluntary Petition Page 37 of 42

Debtor 1	1 Nancy Ann Smith			Case number (# known)
	First Name	Middle Name	Last Namo	

			Your exp	enses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	
6.	Utilities:			
•	6a. Electricity, heat, natural gas	6a.	\$	400.00
	6b. Water, sewer, garbage collection	6b.	\$	300.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	540.00
	6d. Other. Specify:	6d.	\$	
7.		7.	. \$	1,550.00
8.	Childcare and children's education costs	8.	\$	225.00
9.	Clothing, laundry, and dry cleaning	9.	\$	160.00
10.	Personal care products and services	10.	\$	
11.	Medical and dental expenses	11.	\$	
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$	440.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	
14.	Charitable contributions and religious donations	14.		
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	
	15b. Health insurance	15b.	\$	
	15c. Vehicle insurance	15c.	\$	210.00
	15d. Other insurance. Specify:	15d.	\$	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$	
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	475.00
	17b. Car payments for Vehicle 2	17b.	\$	
	17c. Other, Specify:	17c.	\$	
	17d. Other, Specify:	17d.	\$	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	
19,	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	э.		
	20a. Mortgages on other property	20a.	\$	
	20b. Real estate taxes	20b.	\$	
	20c. Property, homeowner's, or renter's insurance	20c.		
	20d. Maintenance, repair, and upkeep expenses	20d.		
	20e. Homeowner's association or condominium dues	20e.	\$	

## Case 1:21-bk-10533 Doc 1-1 Filed 06/30/21 Entered 06/30/21 15:46:48 Desc Voluntary Petition Page 38 of 42

Debtor	1 Nancy Ann Smith First Name Middle Name Last Name	Case number (# known)	
21. O	ther. Specify:	21.	+\$
22. C	alculate your monthly expenses.		
22	a. Add lines 4 through 21.	22a.	\$5,600.00
22	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J	-2 22b.	\$
22	c. Add line 22a and 22b. The result is your monthly expenses.	22c.	\$5,600.00
23. Cal	culate your monthly net income.		5 500 00
23a	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$5,596.00
23b	Copy your monthly expenses from line 22c above.	23b.	-\$5,600.00
230	Subtract your monthly expenses from your monthly income.		s -4.00
	The result is your monthly net income.	<b>23c.</b>	\$
24. Do	you expect an increase or decrease in your expenses within the year after	you file this form?	
For	example, do you expect to finish paying for your car loan within the year or do y tgage payment to increase or decrease because of a modification to the terms of	ou expect your	
Ø	No.	~	
	Yes. Explain here:		

## Case 1:21-bk-10533 Doc 1-1 Filed 06/30/21 Entered 06/30/21 15:46:48 Desc Voluntary Petition Page 39 of 42

Fill in this information to identify your case:		
Debtor 1 Nancy Ann Smith	sst Name	
Debtor 2 (Spouse, if filing) First Name Middle Name La	sst Namo	
United States Bankruptcy Court for the: District of	-a. valid	
Case number		
(If known)		Check if this is ar
	<del></del>	amended filing
Official Form 106Dec		
<del></del>	wideed Debtesis Cabadelas	
Declaration About an Indiv	vidual Deptor's Schedules	12/15
If two married people are filing together, both are equally re	sponsible for supplying correct information.	
Sign Below  Did you pay or agree to pay someone who is NOT an att  ☑ No ☐ You have af someone	•	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration Signature (Official Form 119).	on, and
Under penalty of perjury, I declare that I have read the set that they are true and correct.  * James Signature of Debtor 1	ummary and schedules filed with this declaration and  Signature of Debtor 2	·
Date MM / DD / YYYYY	Date MM / DD / YYYY	

## Case 1:21-bk-10533 Doc 1-1 Filed 06/30/21 Entered 06/30/21 15:46:48 Desc Voluntary Petition Page 40 of 42

		· · · · · ·	
Debtor 1 Nancy Ann Smith First Name Middle Name	Last Namo		
Debtor 2 Spouse, if filing) First Name Middle Name			
Inited States Bankruptcy Court for the: Distri	Last Name		
ase number			
(known)	<del>~</del>		Check if this is ar amended filing
		· <del></del>	amended ming
fficial Form 107			
tatement of Financial Affai	irs for Indivi	duals Filing for Bankrup	otcy 04/1
as complete and accurate as possible. If two mar ormation. If more space is needed, attach a separmber (if known). Answer every question.  art 1: Give Details About Your Marital Sta	rate sheet to this form.	On the top of any additional pages, write y	
What is your current marital status?			
Married			
☐ Not married			
No Yes. List all of the places you lived in the last 3  Debtor 1:	Dates Debtor 1	where you live now. Debtor 2:	
	lived there		Dates Debtor 2 lived there
		Same as Deblor 1	lived there
Elena St., N. Providence	į	Same as Debtor 1	lived there
Elena St., N. Providence  Number Street		Same as Debtor 1  Number Street	lived there
Number Street	From 01/21/2018		lived there  Same as Debtor  From
	From 01/21/2018		lived there  Same as Debtor
Number Street ri 02804	_ From 0 <u>1/21/20</u> 18 To 0 <u>4/21/20</u> 21 —	Number Street	lived there  Same as Debtor  From  To
ri 02804 City State ZIP Code	_ From 0 <u>1/21/20</u> 18 To 0 <u>4/21/20</u> 21 —	Number Street  City State ZIP Code  Same as Debtor 1	lived there  Same as Debtor from  To
Number Street ri 02804	_ From 0 <u>1/21/20</u> 18 To 0 <u>4/21/20</u> 21 	Number Street  City State ZIP Code	Ilved there  Same as Debtor 1  From To  Same as Debtor 1
Number Street  ri 02804  City State ZIP Code	From 0 <u>1/21/2018</u> To 0 <u>4/21/202</u> 1  From	Number Street  City State ZIP Code  Same as Debtor 1	Ilved there  Same as Debtor 1  From  Same as Debtor 1
ri 02804 City State ZIP Code	From 0 <u>1/21/2018</u> To 0 <u>4/21/202</u> 1  From	Number Street  City State ZIP Code  Same as Debtor 1	Ilved there  Same as Debtor 1  From To  Same as Debtor 1  From To
Number Street  ri 02804  City State ZIP Code  Number Street	From 0 <u>1/21/2018</u> To 0 <u>4/21/2021</u> From To	Number Street  City State ZIP Code  Same as Debtor 1  Number Street  City State ZIP Code	Ilved there  Same as Debtor 1  To  Same as Debtor 1  From  To  To  To
Number Street  ri 02804  City State ZIP Code  Number Street  City State ZIP Code	From 01/21/2018 To 04/21/2021  From  From To	Number Street  City State ZIP Code  Same as Debtor 1  Number Street  City State ZIP Code	Ilved there  Same as Debtor  From  To  Same as Debtor  To  From  To  To  To  To  To
Number Street  ri 02804  City State ZIP Code  Number Street  City State ZIP Code  Within the last 8 years, did you ever live with a s states and territories include Arizona, California, Ide	From 01/21/2018 To 04/21/2021 From To To spouse or legal equivalano, Louisiana, Nevada,	Number Street  City State ZIP Code  Same as Debtor 1  Number Street  City State ZIP Code  City State ZIP Code  Rent in a community property state or territo New Mexico, Puerto Rico, Texas, Washington	Ilved there  Same as Debtor  From To  Same as Debtor  From To  From To  To  To  To  To
Number Street  ri 02804  City State ZIP Code  Number Street  City State ZIP Code  Within the last 8 years, did you ever live with a s states and territories include Arizona, California, Ida	From 01/21/2018 To 04/21/2021 From To To spouse or legal equivalano, Louisiana, Nevada,	Number Street  City State ZIP Code  Same as Debtor 1  Number Street  City State ZIP Code  City State ZIP Code  Rent in a community property state or territo New Mexico, Puerto Rico, Texas, Washington	Ilved there  Same as Debtor  From  To  Same as Debtor  From  To  From  To  To  To

## Case 1:21-bk-10533 Doc 1-1 Filed 06/30/21 Entered 06/30/21 15:46:48 Desc Voluntary Petition Page 41 of 42

ebt	tor 1 Nancy Ann Smith First Namo Middle Name Last	Name	Case nu	mber (# known)	
4.	Did you have any income from employmer Fill in the total amount of income you received If you are filing a joint case and you have inco	d from all jobs and all busi	nesses, including part-tir	ne activities.	ndar years?
	☐ No ☑ Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of Income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips  Operating a business	\$22,280.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For last calendar year: (January 1 to December 31,2020	<ul><li>✓ Wages, commissions, bonuses, tips</li><li>✓ Operating a business</li></ul>	\$ 37,656.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For the calendar year before that:  (January 1 to December 31,2019	<ul><li>✓ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$49,843.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
5.	Did you receive any other income during the Include income regardless of whether that income unemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from each of the Income inc	ome is taxable. Examples ents; pensions; rental inco a joint case and you have	of other income are alim ome; interest; dividends; a income that you receive	money collected from laws ed together, list it only once	uits; royalties; and
	Yes. Fill in the details.	Debtor 1		Debtor 2	
	•	Sources of Income Describe below.	Gross Income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	ritdi	\$		\$ \$
	For last calendar year:	ritdi	\$ \$ 9,424.00	***	\$
	(January 1 to December 31,2020 )		\$ \$		\$ \$
	For the calendar year before that: (January 1 to December 31,2019 )	none	\$0.00		\$
	(January 1 to December 51,2010_)		\$		\$

## Case 1:21-bk-10533 Doc 1-1 Filed 06/30/21 Entered 06/30/21 15:46:48 Desc Voluntary Petition Page 42 of 42

ebtor 1	Nancy Ann Smith First Name Midde Name Last Name	<del></del>	Case	number (# known)	
Part 3:	List Certain Payments You Made Befo	ore You Filed	l for Bankruptcy		
6. Are ei	ther Debtor 1's or Debtor 2's debts primarily	consumer deb	ts?		
□ No	<ul> <li>Neither Debtor 1 nor Debtor 2 has primaril "incurred by an individual primarily for a perso</li> </ul>	y consumer de onal, family, or l	ebts. Consumer debts a nousehold purpose."	re defined in 11 U.S.C. § 10	1(8) as
	During the 90 days before you filed for bankru	iptcy, did you p	ay any creditor a total o	f \$6,825* or more?	
	☐ No. Go to line 7.				
	Yes. List below each creditor to whom you total amount you paid that creditor. E child support and alimony. Also, do not be supported to the child support and alimony.	o not include p	avments for domestic s	upport obligations, such as	
	* Subject to adjustment on 4/01/22 and every				
Ø Y∈	s. Debtor 1 or Debtor 2 or both have primarily	/ consumer de	bts.		
	During the 90 days before you filed for bankru			f \$600 or more?	
	☐ No. Go to line 7.				
	Yes. List below each creditor to whom you creditor. Do not include payments for alimony. Also, do not include payments	domestic supp	ort obligations, such as	child support and	
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	none		\$	\$	☐ Mortgage
	Creditor's Name				Car
	Number Street				☐ Credit card
					Loan repayment
					☐ Suppliers or vendors
	City State ZIP Code				Other
	Creditor's Name	•	\$	\$	☐ Mortgage
					Car
	Number Street				Credit card
					Loan repayment
				•	Suppliers or vendors
	City State ZIP Code			•	Other
				•	
	Creditor's Name		\$	_ \$	☐ Mortgage
					Car
	Number Street	<del></del>			Credit card
					Loan repayment
					Suppliers or vendors
					☐ Other